Form PTO/SB/02A (03/97) PATENT AND TRADEMARK OFF (exp. 09/30/98) OMB No 0651-0032 U.S. DEPARTMENT OF COMME										
DECLARA	ATION FOR	Attorney Docket No	o. 2							
	ESIGN PA		First Named Invent		Flautt, et al					
	PPLICATION		COMPLETE IF H							
M.C.	PLICATIO	JIN	Application Number	r <u>C</u>	09/190,866	866				
☐ Declaration	or 🛛 [Declaration	Filing Date		11/13/98					
Submitted		Submitted After		Ī	<u>Jnknown</u>					
with Initial Fi	iling I	Initial Filing	Examiner Name	ı	Jnknown					
As a below named inventor, I hereby declare that:										
My residence, post office	address, and citizen	iship are as stated t	pelow next to my name.							
names are listed below) o	of the subject matter t	which is claimed and	name is listed below) or an origing for which a patent is sought or sought or the sought of the soug	on the invention	n entitled:	ral .				
		(Title of	the Invention)							
the specification of which										
is attached here										
OR	310									
09/190,866 I hereby state that I have by any amendment speci	and was amended reviewed and unders ifically referred to abo	on (MM/DD/YYYY) stand the contents o	ates Application Number or PC (if applicable). of the above identified specification of the above identified specification of the above identified specification of the above identified in Title (in Title (ation, including	the claims, as am	ended				
or inventor's certificate, or States of America, listed l	or §365(a) of any PCT below and have also	Finternational applic identified below, by	es Code §119(a)-(d) or §365(b) cation which designated at least checking the box, any foreign date before that of the application	st one country of application for	other than the Unite patent or inventor	ed				
Prior Foreign Application Number(s)	Coun	ıtry	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	t Certified Copy Attached? YES NO					
			mental priority data sheet PTO/							
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.										
Application Nu	ımber(s)	Filing Da	ate (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						

DECLARATION - Utility Or Design Patent Application

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

national or PCT international filing date of this application.											
U.S. Parent Application Number(s)		P	CT Parent N	lumber		Pare (M	1	Parent Patent Number (if applicable)			
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark office connected therewith: OR Registered practitioner(s) to prosecute this application and to transact all business in Place Customer Number Bar Code Label Here Registered practitioner(s) name/registration number listed below											
Name				Registration Number			N1		Registration		
C. Micha	el Gegenheime	r	33,38		+	· · · · ·	Name			-	Number
Inger H. I			38,0	17						l	
Stephen	W. Barns		38,03	37							
Additional r	registered practitions	er(s) named	on suppleme		stered	Practitioner	Information :	sheet PT	O/SB/02C a	l attach	ed hereto.
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below											
Name	Docket Admin	istrator	,				·				
Address	Owens Cornin	ıg					*				
Address	2790 Columbu	ıs Road,	Building 5	54			.,				
City	Granville			Sta	te	Ohio			ZIP		43023
Country	USA		Tele	ephone		740/321-7168 F			Fax 740/321-8024		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sol	Name of Sole or First Inventor: A petition has been filed for this unsigned inventor									ed inventor	
	Given Name (first ar	any])			Family Name or Surname						
Martin Charles Flautt											
Inventor's Sig	Chu		Klaud		Date	te /2		/11/98			
Residence: (State	Ohio		Country	USA		Citizensh	ip	USA	
Post Office Address											
Post Office A		noll Drive									
City	Granv	ille	Stat	te Oh	io	ZIF	4302	3 0	Country	US	A
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.											

SUPPLEMENTAL ADDITIONAL INVENTOR(S) SHEET												
Name of Second Inventor: A petition has been filed for this unsigned inventor.									ned inventor			
Given Name (first and middle [if any])						Family Name or Surname						
James Robert						Priest						
Inventor's Signature	Clark Con					Date 17-//-93						
Residence: City	Nashport		State	Ohio		Cou	ntry U	ISA	Citizen	~~~	USA	
Post Office Address												
Post Office Address	7285 Cedar Court E											
City	Nashport State Ohio ZIP 43830 Country USA								SA			
Name of Third Inventor: A petition has been filed for this unsigned inventor									ned inventor			
Given Nan	ne (first and middl	e [if any	·])			Family Name or Surname						
	David V.	1				1		St	otler			
Inventor's Signature	Van	1/	V. L	Tol	1/	<u> </u>		D	ate /	2/	1/98	
Residence: City	Newark		State	Ohio		Cou	ntry U	SA	Citizens	ship	USA	
Post Office Address												
Post Office Address	1158 Sharon	Valle	y Road									
City	Newark		State	Ot	oio		ZIP	43055	Country	U	SA	
Name of Fourth Inventor: A petition has been filed for this unsigned inventor									ned inventor			
Given Name (first and middle [if any]) Family Name or Surname												
	Thomas P.	<u> </u>						Ha	ager			
Inventor's Signature									198			
Residence: City	Westerville State Ohio					Country USA Citizenship USA						
Post Office Address												
Post Office Address	1109 Lake P	oint D	rive			-						
City	Westerville		State	Or	nio		ZIP	43082	Country	US	SA	
Name of Fifth Invent	or:			_			A petit	ion has been t	filed for this	unsigr	ned inventor	
Given Name (first and middle [if any])					Family Name or Surname							
	· · · · · · · · · · · · · · · · · · ·				<u> </u>							
Inventor's Signature								Da	ate			
Residence: City			State			Cour	ntry		Citizens	ship		
Post Office Address										_		
Post Office Address								-				
City			State				ZIP		Country		-	
Name of Sixth Inventor:						A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Family Name or Surname												
Inventor's Signature								Da	ite			
Residence: City	State			Country Citizenship								
Post Office Address												
Post Office Address		·		_,								
City			State	1			ZIP		Country			